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Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				Application Number	10/553,643-Conf. #1454
				Filing Date	October 14, 2005
				First Named Inventor	Philippe Chalvignac
				Art Unit	3771
				Examiner Name	C. W. Stuart
				Attorney Docket Number	SAIME 3.3-003
Sheet	2	of	2		

[illegible]

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.